

# California M E D I C I N E

## EDITORIAL

### A.M.A. Annual Meeting

CHICAGO PROVED its eminence as a host city to the American Medical Association meeting last month, when some 15,000 physicians and a like number of others gathered for the one hundred and first annual A.M.A. session. The big medical meeting of the year was, by all reports, one of the finest in the national organization's history.

On the scientific side, about 400 papers were presented before the fifteen scientific divisions. Attendance, as usual, was to capacity and the papers of extremely high caliber. Enthusiasm in many sections was sharpened by the advance meetings of numerous specialty societies. These, as well as the A.M.A. sessions themselves, drew an outstanding array of science writers from all parts of the country.

For the hundreds of exhibits, both scientific and technical, Chicago's famed Navy Pier was used. Five-eighths of a mile long, this structure literally gleamed with what has been called "a world's fair of medicine." Personnel of the A.M.A. exhibit departments used motor scooters to cover the distances they had to travel to administer the show.

In the House of Delegates, interest was pretty well centered on the controversy which has arisen between the A.M.A. and the Commission on the Health Needs of the Nation appointed by President Truman. Dr. John W. Cline, outgoing A.M.A. president, leveled off at this commission in his farewell address to the House of Delegates and was immediately supported by a resolution pointing out the political motivation for the appointment of the commission. After considerable discussion, pro and con, this resolution was tabled, only to rise again when the original parliamentary procedure was found to have been faulty. Reintroduced in a way that satisfied parliamentary rules, the resolution was assigned to a reference committee where opponents and proponents were given full opportunity to state their views. When the resolution was returned to the House,

altered only by elimination of personalities, it received an overwhelmingly affirmative vote.

Numerous other actions were taken by the House of Delegates, among them the elimination of A.M.A. Fellowships. When the national body began assessing annual membership dues, the coexistence of membership and fellowship caused endless confusion. Now there is only one designation—*member*.

A California resolution adopted by the C.M.A. House of Delegates in April, calling for negotiations looking toward eventual amalgamation of the medical and osteopathic professions, was well received by the House of Delegates. Support was apparent from many states where the licenses of both medical doctors and osteopathic physicians and surgeons are identical and where this fact causes many problems. The A.M.A. governing body referred this proposal to the Board of Trustees, with the suggestion that steps be taken in conjunction with the American Osteopathic Association to review the present situation. One item of importance in this connection was the suggestion that any stigma of unethical conduct be

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removed from a doctor of medicine who might otherwise teach in an osteopathic school and help it elevate its standards. This is a long-range program but at least it is now officially launched and cannot but make progress.

Dr. Louis H. Bauer, New York, who was chosen as president-elect a year earlier, was seated as president. The delegates elected Dr. Edward J. McCormick of Toledo as the new president-elect, and Dr. James R. Reuling of Bayside, N. Y., as Speaker of the House of Delegates. California's Dr. E. Vincent Askey was unanimously elected Vice-Speaker of the House, a position he filled splendidly as vice-speaker pro tem during the entire meeting.

For members of the Board of Trustees, the delegates reelected Dr. Dwight H. Murray of Napa for a five-year term and chose Dr. James R. McVay of Kansas City for a like period. Dr. Murray subsequently was again made chairman of the board. Dr. John Cline was elected to the Council on Medical Education and Hospitals.

All in all, the meeting was a smooth-running and successful gathering. Proceedings of the House of Delegates are now appearing in the *Journal of the American Medical Association*, and many of the papers read before the scientific sections will soon be in print. Both the business and the scientific reports are recommended reading.

## New Lines

EVEN ONE NOT greatly concerned with fashion or with change for the sake of change may note in moments of prideless candor that a car he has confidently driven perennially, is less serviceable than later models, and perhaps less handsome.

In the interest of greater serviceability and with a nod to cosmetic values, beginning with this issue CALIFORNIA MEDICINE comes out with changes in design. Foremost, for easier reading the lines of type in text matter are slightly more widely separated than heretofore. To fetch the eye, the type face used for the titles of articles is one that, to borrow a word from a profession given to imaginative language, has a little more *oomph*. Text material is salted with subheads that are bolder than those formerly used; and, for both readability and accent, headings for tables and captions for pictures are a little more extended and a little bolder. The editorial page and the first page of the California Medical Association section and of the Book Reviews section have been spruced. Other changes may be made from time to time to make your journal easier to read, or just for good looks.

As CALIFORNIA MEDICINE is, in a sense, a representative of the California Medical Association, it is only proper to send it forth suitably dressed.

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## LETTERS to the Editor . . .

### Prenatal Sex Determination

In the course of a study of possible applications of the Richardson Pregnancy Test<sup>2</sup> to saliva, tears and perspiration, Raff and Richardson<sup>1</sup> of the Department of Biochemistry, Loyola University, Chicago, tested the salivas of 376 women during the sixth or seventh months of pregnancy. In 225 of these salivas the Richardson test was positive, while 151 of the women gave negative salivary reactions.

An apparent explanation of this difference was suggested after delivery of the child, when 218 (or 98.6 per cent) of the women with positive salivary reactions gave birth to a male child, while 148 (or 95.5 per cent) of the women with a negative Richardson salivary reaction gave birth to a female child.

The Loyola biochemists believe that the substance responsible for the positive salivary reaction is some unknown androgenic hormone secreted by the unborn male child and selectively excreted by the maternal salivary glands since a positive test results in the non-gravid female after an injection of testosterone or androsterone. Their preliminary report is made in the hope of stimulating early confirmations of their theoretically and clinically suggestive findings.

W. H. MANWARING, M.D.  
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#### REFERENCES

1. Raff, G. W., and Richardson, G. C.: A saliva test for prenatal sex determination, *Science*, 115:265, Mar. 7, 1952.
2. Richardson, G. C.: A new biochemical test for pregnancy, *Am. J. Obst. & Gynec.*, 61:1317, 1951.